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Gunder the Paperwork Reduction Act of 1995, no persons are requi	red to re	espond t	o a coll	ection of	information	unless it displa	gh 10/31/2 ays a valid	d OMB cor	B 0651-0032 htrol number.	
		Complete if Known/								
FEE TRANSMITTAL	Application Number				09/923,444-Conf. #9646					
for FY 2003		Filing Date				August 8, 2001				
Patent fees are subject to annual revision.		First Named Inventor				Yi Li	F-3 F			
Patent fees are subject to annual fevicion.	Examiner Name					M. Allen	<u> </u>	<u>-CE</u>	IVE	
Applicant claims small entity status. See 37 CFR 1.27	Group Art Unit					1631				
OTAL AMOUNT OF PAYMENT (\$) 276.00		Attorney Docket No.				PF116D1C	1 DE	C 2'	7 2002	
METHOD OF PAYMENT (check all that apply)		FEE CALCU				LATION (continued)				
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Human Genome Sciences, Inc.	1052	50	2052	25		 late provision 	al filing fe	e or cover	1 1	
e Commissioner is hereby authorized to: (check all that apply)	ļ				sheet.				\vdash	
Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	-	h specification			\vdash	
Charge any additional fee(s) during the pendency of this application	1812	2,520	1812	2,520		request for ex pa				
Charge fee(s) indicated below, except for the filing fee	1804	920*	1804	920*	Requesting Examiner a	sting publication of SIR prior to				
the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting	sting publication of SIR after				
	1251	110	2251	55	Examiner a	action for reply within	first mont	h		
FEE CALCULATION	1252		2252	200		on for reply within second month				
BASIC FILING FEE rge Entity Small Entity	1253		2253	460		for reply within				
e Fee Fee Fee Foo Description	1254	1,440	2254	720	Extension	for reply within	fourth mo	nth		
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01 740 2001 370 Utility filing fee 02 330 2002 165 Design filing fee	1401	-	2401	160	Notice of A	Appeal				
03 510 2003 255 Plant filing fee	1402	320	2402	160	-	ef in support of	an appea	al	<u></u>	
04 740 2004 370 Reissue filing fee	1403	280	2403			or oral hearing			-	
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EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1501		2502		Design iss		-,			
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tal Claims 29 -23** = 6 x 18.00 = 108.00	1503 1460		1460			ons to the Commissioner				
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202 18 2202 9 Claims in excess of 20	1809	740	2809	370	(37 ČFR 1	I.129(a))				
201 84 2201 42 Independent claims in excess of 3	1810	740	2810	370	For each	additional inver	ition to be	•		
203 280 2203 140 Multiple dependent claim, if not paid	180		280	1 370		or Continued E		n (RCE)		
204 84 2204 42 ** Reissue independent claims over original patent	180		180		Request f	or expedited ex				
205 18 2205 9 ** Reissue claims in excess of 20			1	_ 555	of a desig	n application				
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or number previously paid, if greater; For Reissues, see above						Complete (if applicat	ole)		
ubMitteD BY ame (Print/Type) Janet M. Martineau , , ,	Regi	istration l	Vo.	6,903		Telephone			23	
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